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7590

03/03/2004

George Likourezos  
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 445 Broad Hollow Road  
 Melville, NY 11747

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George Likourezos	(Depositor's name)
<i>George Likourezos</i>	(Signature)
May 26, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/608,833	06/26/2003	Frederick Schuessler	1400-28 DIV (1081 DIV)	7600

TITLE OF INVENTION: INK-SPREAD COMPENSATED BAR CODE SYMBOLOGY AND COMPENSATION METHODS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LABAZE, EDWYN	2876	235-462250

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 CARTER, DELUCA,  
 2 FARRELL & SCHMIDT, LL  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Symbol Technologies, Inc. Holtsville, New York

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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(Authorized Signature) *George Likourezos* (Date) 5/26/2004

George Likourezos; Reg. No. 40,067

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